

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hershel Slaughter, #363-213
Warren Correctional Institute
P.O. Box 120
Lebanon, OH 45036-0120

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

C. S. SANDERS 3/26/04

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Registered☐ Insured Mail☐ Restricted Delivery? (Extra Fee)☐ Express Mail☐ Return Receipt for Merchandise☐ C.O.D.☐ Yes

7003 0500 0002 0889 9094

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

67-828 (Doc 12) SAS

Domestic Return Receipt

102595-0254-1540